contacting the needle point. The base of container **76** extends outwardly to provide wings **87,88** on either side of the container. As seen in FIG. **3**, these wings facilitate a sliding drawer function when container **76** is incorporated in container **67**. Handle **90** allows container **76** to be easily removed from the underside of the suture needle tray **67**. The relatively wide baseplate formed by wings **87,89** also provides stability enabling the container to be placed on a patient's person during an operation.

Suture recess serves the dual purpose of maintaining suture **78** in a sterile environment and provides sufficient room for a user's fingers to grasp the blunt end of the needle. Straight suture needles are very fine and are therefore very light in weight. To ensure that the light needle does not become dislodged during transfer, a small magnet **89** is positioned beneath needle recess **79**.

The containers described above can be made from a range of suitable material as will be well known to those skilled in the art. If intended to be re-used they can be made from autoclavable plastic and will include sufficient steam ventilation holes for autoclaving purposes. Alternatively if intended to be disposable, they can be made cheaply from a suitable plastics material.

In use during surgical procedures, it will be appreciated that containers in accordance with the present invention utilise a principle conferring significant advantages over existing methods, systems and equipment. Sharp instruments are traditionally passed between surgeons, scrub nurses and other theatre staff either directly hand to hand, or by being placed in a container such as a conventional general purpose kidney bowl.

However in accordance with the present invention, the dangers of needle stick injury or other injury from a non-sterile sharp instrument which may have been invasively used on a patient are significantly reduced by utilising a specific purpose-designed container in which the sharp instrument is positioned by the transferor of the sharp instrument and from which the sharp instrument is removed by the transferee or receiver of the sharp instrument, the container of the present invention being such that the sharp instrument is received within an instrument recess and positioned therein such that the cutting portion of the instrument is not directed towards the opening of the instrument recess whereby the fingers of the transferor or transferee are substantially prevented from contacting the cutting portion.

The scalpel container provides substantial advantages and is an improvement on the traditional kidney tray which being an open topped disk gives little if any protection to users against accidental injury from the scalpel blade. Injury from scalpel blades carry the possibility of an operator contacting a serious or fatal disease and the present invention significantly minimises this risk.

The present invention also improves upon the current method for storing scalpels on a scrub nurse's instrument trolley (which is simply to place them into an open kidney shaped disk or to leave them siting loosely on the sterile cloth drape which covers the instrument trolley). Removing the blade and its handle from these kidney dishes involves the risks mentioned above, and storing them loosely on the drapes not only involves the same risk but also carries the risk of the sharp blade penetrating the cotton trolley drape and rendering the blade tip unsterile. This would then render the cloth trolley unsterile as well and would also put the patient at risk of contracting an infection.

The suturing needle container also has a number of significant advantages. Suture materials vary in length and

in elasticity and some modern materials are very loose and fall freely under gravity to their full length. In an operating theatre anything that falls below scrub nurse waist level is deemed to be unsterile and endangers the patient of contracting an intra-operative infection. This frequently occurs with known methods of needle holder and suture transfer between surgeon and scrub nurse. Storing all the suture material in the dished recessed area of the tray avoids this problem. The tray also protects the patient against needle stick injury. Often when the scrub nurse is busy, the surgeon if finished the operation will place a needle holder with a suture needle loaded onto it onto the drapes covering the patient. This can then penetrate the drapes and injure the patient. Personal transfer of a loaded needle holder from one person to another, as commonly occurs in known systems, carries a high risk of needle stick injury. The suture tray of the present invention significantly minimises all these risks.

The physical transfer of straight needles between members of a surgical team also involves an extremely high risk of needle stick injury and this is also significantly minimised by the straight needle container of the present invention.

It will of course be realised that whilst the above has been given by way of an illustrative example of this invention, all such and other modifications and variations hereto, as would be apparent to persons skilled in the art, are deemed to fall within the broad scope and ambit of this invention as is herein set forth.

What is claimed is:

1. An apparatus comprising a scalpel and a container holding said scalpel, said scalpel including:

a blade attached to a handle, said scalpel having a major cross-sectional dimension and a minor cross-sectional dimension; and

said container including:

an elongated scalpel recess closed at each end and receiving said scalpel, and having a first portion receiving said scalpel blade and a second portion receiving at least part of said scalpel handle, said portions having a width slightly greater than that of the major cross-sectional dimension of the scalpel and depth slightly greater than that of the minor cross-sectional dimension of the scalpel, the length of said scalpel recess being such that the scalpel blade is located within one of said portions irrespective of the position of the scalpel in the scalpel recess, and

guide means for guiding a scalpel placed in said container to said scalpel recess;

the arrangement being such that the scalpel received within said scalpel recess is positioned therein such that the scalpel blade is not directed towards the opening of the scalpel recess whereby a user's fingers are substantially prevented from contacting a cutting portion of the scalpel blade.

2. An apparatus as claimed in claim **1**, wherein said container includes inclined walls converging to said opening, the inclined walls constituting said guide means.

3. An apparatus as claimed in claim **1**, wherein said scalpel recess has sidewalls and a base, the junctions thereof being radiussed such that a scalpel is disposed to rest in the recess with its major cross-sectional dimension parallel to said base.

4. An apparatus as claimed in claim **1**, said container including access means for providing a user with access to the scalpel handle for removing the scalpel from said scalpel recess.

5. An apparatus as claimed in claim **4**, wherein said access means includes a finger access recess, the cross sectional

configuration of said finger access recess being such as to allow a user's fingers to contact the scalpel handle for removing the scalpel from said scalpel recess, the position of said finger access recess being such that the scalpel blade is not located within said finger access recess irrespective of the position of the scalpel in the instrument recess.

6. An apparatus as claimed in claim 1, said container including barrier means for preventing a user's fingers from entering said scalpel recess.

7. An apparatus as claimed in claim 6, wherein said barrier means constitutes the opening to said scalpel recess, the width of said opening being such as to allow a scalpel to enter the recess but to prevent a user's fingers entering the recess.

8. An apparatus as claimed in claim 1, said container including handle means whereby a user can hold the container.

9. An apparatus as claimed in claim 1, said container including handle mounting means for mounting a detachable handle whereby a user can hold the container.

10. An apparatus as claimed in claim 1, said container including a plurality of said scalpel recesses each adapted to receive a scalpel therein.

11. A container for holding a suture needle holder and a suturing needle held thereby during surgical procedures, the container including:

a substantially semi-cylindrical needle recess adapted to receive the suturing needle therein, and

guide means for guiding a suturing needle held by a suture needle holder to said needle recess;

the arrangement being such that a suturing needle received within said needle recess is positioned therein such that the point of the suturing needle is positioned within the needle recess such that a user's fingers are substantially prevented from contacting the point.

12. A method of retrievably and temporarily storing a scalpel between uses of the scalpel during a surgical procedure, said scalpel having a handle portion and a blade and having a major cross-sectional dimension and a minor cross-sectional dimension, said method comprising:

placing the scalpel held by an operator into an instrument recess in an instrument holding container, the scalpel being held within the container to be easily accessible during surgical procedures, and

removing the scalpel by the operator from the instrument recess, said instrument recess being closed at each end and adapted to receive said scalpel, and having a first portion adapted to receive said scalpel blade and a second portion adapted to receive at least part of said scalpel handle, said portions having a width slightly greater than that of the major cross-sectional dimension of the scalpel and depth slightly greater than that of the minor cross-sectional dimension of the scalpel, the length of said scalpel recess being such that the scalpel blade is located within one of said portions irrespective of the position of the scalpel in the scalpel recess, and said instrument holding container having inclined guides for guiding a scalpel placed therein to said instrument recess, the arrangement being such that a scalpel received within said instrument recess is position therein to be easily accessible for re-use during surgical procedures and such that the cutting portion thereof is not directed towards the opening of the instrument recess whereby an operator's fingers are substantially prevented from contacting said cutting portion.

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